

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	20	69861	4/27
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		65372	6-22-00
RESPONSE FORMALITY REVIEW	11	11	8-31-00

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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REST AVAILABLE COPY

If more than 150 claims or 10 actions  
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